SUPMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Payfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received) AUG 0 7 2020

Date: ENTERED Refund:

Permit #: 20-0250 Amount Paid:

INSTRUCTIONS: No permits will be issued until all fees are paid.

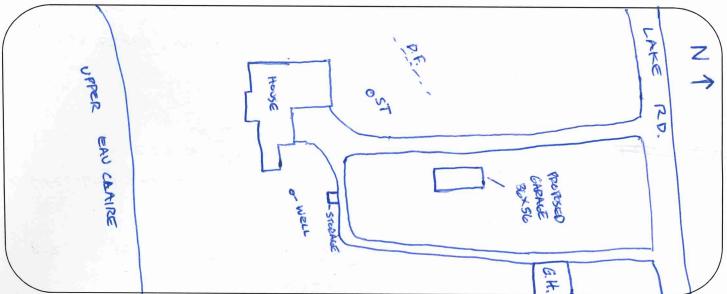
Bayfield Co. Zoning Dept.

Checks are made p DO NOT START CO				Department. HAVE BEEN ISSUED TO A	APPLICANT. Original	Application MU	ST be submitted	FILL OUT IN INK	(NO P	ENCIL)
TYPE OF PERMIT	REQUEST	ΓED→	X	LAND USE SA	NITARY PRIVY	☐ CONDITION	AL USE SPECIA	LUSE B.O.A.	□ ОТ	HER
Owner's Name:	DIANE	14	MLLER	T	ailing Address: 44 270 th St		City/State/Zip:	11 (40)		ohone:
Address of Proper	ty:		· · · · ·	0	City/State/Zip:		octore, o	VI (370 ZI	- 7	2258
51340 U	HKE 1	20.			BARNES U	1 548	73			Phone:
	HOFF	Col	VST.		5-641-1589	Plumber:			Plum	ber Phone:
Authorized Agent:	(Person Sign	ning Appli	cation on beha	If of Owner(s)) Ag	gent Phone: SI- 261	Agent Mailir	ng Address (include City		Writ	
SERIO	1	F			2258	-	270th St		Auth	orization ched
		•	WILL	LERT -	Tax ID#	Wood	us, wis	Recorded Documen	t· (Showi	
PROJECT LOCATION	Legal	Descrip	tion: (Use T	Tax Statement)	37950	1		04004244	0903	20400014
5 <u>E</u> 1/4, 1	NW 1	./4	Gov't Lot	Lot(s) CSN		M Doc# Lo	t(s) # Block #	Subdivision:	1	
Section	, Tow	nship _	14 N, F	Range <u>09</u> W	Town of:	NES	,	Lot Size 240 × 434	A	reage 2.8
•					Stream (incl. Intermittent)		cture is from Shorelin	St. Market Co.		Are Wetlands
Shoreland _			200000	of Floodplain? in 1000 feet of Lake,	If yescontinue>	260		feet in Floodp		Present?
a 1 2 10 to	lis P	торегту	/ Land Withi		If yescontinue ->	Distance Struc	cture is from Shorelin	feet Ve		☐ Yes ✓ No
☐ Non-Shoreland	d							2 140		
Value at Time		i de la compa								WE THE ASSESSMENT PROPERTY.
of Completion				Project	Project	Total # of bedrooms		hat Type of		Type of
* include donated time		Projec	t	# of Stories	Foundation	on	THE REPORT OF THE PROPERTY OF	anitary System(s) t <mark>he property <u>or</u></mark>		Water on
& material						property	Will be	on the property?	ST 152250	property
	□ New	Constru	uction	1-Story	Basement		☐ Municipal/Cit	y Specify Type:		☐ City
ė	☐ Addit	ion/Al	teration	☐ 1-Story + Loft	☐ Foundation	□ 2	- (New) Samtar	y Specify Type:		✓ Well
65,500	□ Conv	ersion		★2-Story	□ Slab	Z 3	☐ Sanitary (Exist	ts) Specify Type:		
	☐ Reloc	ate (exi	sting bldg)				Privy (Pit) or	☐ Vaulted (min 2	200 gallo	<u> </u>
	☐ Run a		0 0,		Use	None	□ Portable (w/se		.oo gano	11)
	Prope			1 (5-9)	☐ Year Round		☐ Compost Toile	et		
	Z GAR	LITTE		1-STORY+ATTIC	A SLAB	8 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /	□ None			
				siness is being applied			Width:	Heig		
Proposed Cons	truction:	(overa	II dimensior	ns)	Length:	36	Width: 56	Heig	nt:	20
Proposed U	Jse	1			Proposed Structu	ire		Dimensions		Square
			Principal	Structure (first st	ructure on property)			(x)	Footage
			Residenc	e (i.e. cabin, hunti	ng shack, etc.)			(x)	
Residentia	l Use			with Loft			(X)		
				with a Porch with (2 nd) Porcl	h			(X)	
				with a Deck				(x)	
☐ Commerci	al Use			with (2 nd) Deck				(x)	
				with Attached				(X	.) -	
					or sleeping quarters			(X)	
				/Alteration (explain	d date)			(X)	
☐ Municipal			Accessor	v Building (explain)	GARAGE	of Colleston	Dea	(36 X 56	1	2,016
Rec'd for	issuano		Accessor	y Building Additio	n/Alteration (explain	1 W/B	athroom	(x)	21010
SEP 0	1 2020						Louek	(x)	
Call Park								(X)	
Secreta	rial Staff			xplain)			1	(X)	r
(are) responsible for	the detail and	accuracy of this inform	ny accompanyir f all information	ng information) has been ex I (we) am (are) providing an In (are) providing in or with t	TARTING CONSTRUCTION amined by me (us) and to the bind that it will be relied upon by this application. I (we) consent	est of my (our) knowle	dge and belief it is true, corre	ect and complete. I (we) a	ot liability v ss to the ab	which may be a bove described
	nt:	1		ar, from tracking	or letter(s) of authorizat			Date		
Marin San San San San San San San San San Sa	(If y	ou are si	gning on beh	alf of the owner(s) a le	etter of authorization mus	st accompany this	application)			Maria
Address to sen		644	- 27	oth St h	DOODVILLE, W	5407	8	Copy of Ta	ch v State	evant .

Copy of Tax Stateried Deed

If you recently purchased the property send your Recorded Deed

ox below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements			Description	Setback Measurements	
Setback from the Centerline of Platted Road	118	Feet		Setback from the Lake (ordinary high-water mark)	260	Feet
Setback from the Established Right-of-Way	25	Feet		Setback from the River, Stream, Creek		Feet
				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	100	Feet				
Setback from the South Lot Line	260	Feet		Setback from Wetland		Feet
Setback from the West Lot Line	241	Feet		20% Slope Area on the property	☐ Yes	Z No
Setback from the East Lot Line	173	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	138	Feet		Setback to Well	185	Feet
Setback to Drain Field	130	Feet				
Setback to Privy (Portable, Composting)		Feet				
Prior to the placement or construction of a structure within ten (10) for	at of the minimum up	attack waste of a	L L	avade as the frame which the cottests with the set of t		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 14	3-1445	# of bedrooms:	Sanitary Date: 10/2/19			
Permit Denied (Date):	Reason for Denial:			10/)///0			
Permit #: 20 - 02 50	Permit Date: 9-9	-20					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Update of Updat		Mitigation Required Mitigation Attached	□ Yes □ No □ Yes □ No	Affidavit Required Yes No Affidavit Attached Yes No			
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by Ves INO	y Variance (B.O.A.) Case	a #:			
	□ No	Were Property Line	es Represented by Owner Was Property Surveyed	Yes No			
Inspection Record:		. 1		Zoning District (R-1) Lakes Classification ()			
Date of Inspection: 8/10/20	Inspected by:		Property and the	Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.) Not for faulth Habitation or sleeping If pressurize Have enters structure - septic permits required Continue to work w/Land Conscrution on Shoreland mitigation: considerly 10-1-21							
Alleran				Date of Approval:			
Hold For Sanitary: Hold For TBA:	Hold For Affi	idavit: 🗆	Hold For Fees:				

wn, City, Village, State or Federal ermits May Also Be Required

LAND USE - X
SANITARY - Private Intercept #18-144S
SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

20-0250 **Craig & Diane Willert** Issued To: No. Range 9 **Barnes** Location: Township 44 W. Town of $\frac{1}{4}$ of -1/4 Section CSM# 2064 Subdivision Gov't Lot Lot Block

For: Residential Accessory Structure: [2- Story; Garage with Cold Storage & Bathroom (36' x 56') = 2,016 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not for human habitation or sleeping. Continue to work with Land Conservation on shoreland mitigation, complete by October 1, 2021.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 9, 2020

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County**

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

TYPE OF PERMIT REQUESTED→

Authorized Agent:

Address to send permit 195

APPLICATION FOR PERMIT Permit #: BAYFIELD COUNTY, WISCONSIN Date: Amount Paid: SEP 0 1 2020 Refund: Bayfield Co. Zoning Dept

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION <u>UNTIL ALL PERMITS HAVE BEEN ISSUED</u> TO APPLICANT.

Original Application MUST be submitted LAND USE

SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

FILL OUT IN INK (NO PENCIL)

Owner's Name:						I Selection of the sele	City/State/Zip:			
Darrel L					Mailing Address: 1957 Cresco	entace	LAT 54703	Telephone: 715-821-1353		
Address of Proper S2445	ty: Lake	. RI		,	City/State/Zip:	::	Cell Phone:			
Contractor:			2		Contractor Phone:	Plumber:	Plumber Phone:			
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Terry T-Weller (Son)				lf of Owner(s))	Agent Phone: 7/5-821-		y/State/Zip): Written Authorization Attached Yes INO			
PROJECT LOCATION	Legal	Descript	tion: (Use T	ax Statement)	Tax ID# 314	14		Recorded Document: 2011 R - 5Y/75	(Showing O	
Sw _{1/4} ,1/4 Gov't Lot Lot(s) CSM Vol & Page CSM Doc# Lot(s) # Block # Subdivision:										
Section 34	, Tow	nship	45 N, R	tange <u>09</u> w	Town of:	savnes ((004)	Lot Size	Acrea	ge 0. 60
45	Creel			n 300 feet of Rive of Floodplain?	r, Stream (incl. Intermittent) If yescontinue	I	ructure is from Shorelin	feet in Floodpla	in Ar	e Wetlands Present?
☐ Shoreland —	□ Is P	roperty	/Land withi	n 1000 feet of Lak	e, Pond or Flowage If yescontinue		ructure is from Shorelin	Zone? Yes feet		☐ Yes ■ No
Non-Shoreland	d									
Value at Time of Completion * include donated time & material	Project Project # of Stories			# of Stories	Project Foundation	Total # of bedrooms	Sewer/S	hat Type of sanitary System(s) the property or on the property?		Type of Water on property
4 4		Constru	2.20.00	1-Story	☐ Basement	□ 1	☐ Municipal/Cit			☐ City
\$.	Addit	Addition/Alteration Loft			☐ Foundation	□ 2	Recently in	Stalled		Well
25,000	☐ Conv	Conversion 2-Story			Slab	□ 3	□ 3 □ Sanitary (Exists) Specify Type:			
		Relocate (existing bldg)			Use	☐ Privy (Pit) or ☐ Portable (w/se	□ Vaulted (min 20	0 gallon)		
Run a Business on		Use	□ None	Portable (w/se	ervice contract)	1				
!	Prone	artv			Voor Pound					
	Prope		May_		Year Round		☐ Compost Toile			
	Y BI	unkh	wax		✓ <u>Seasona</u>		☐ Compost Toild☐ None	et		
Existing Structu Proposed Const	₽BI	ition, alte	eration or bus		✓ <u>Seasona</u>	26'	☐ Compost Toile			
Proposed Const	re: (if add	ition, alte	eration or bus		ied for) Length: Length:	26'	Compost Toile None Width: 24	Height	:	Square Square
	re: (if add	ition, alte	eration or bus	is)	ied for) Length: Length: Proposed Struct	26'	Compost Toile None Width: 24	Height Height Dimensions	: S	Square ootage
Proposed Const	re: (if add	ition, alte	eration or bus Il dimension Principal	Structure (first	ied for) Length: Length:	26'	Compost Toile None Width: 24	Height	: S	
Proposed Const	re: (if add truction:	ition, alte	eration or bus Il dimension Principal	Structure (first	ied for) Length: Length: Proposed Struct structure on property	26'	Compost Toile None Width: 24	Height Height Dimensions	: S	
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Proposed Const Proposed L Residentia Commercia Municipal	Jse Use Use	ition, alter (overal	Bunkhou Mobile H Addition Accessor Special U Conditior Other: (e)	Structure (first e (i.e. cabin, hur with Loft with a Porch with (2 nd) Po with a Deck with (2 nd) De with Attache se w/ (Sanitary lome (manufactu /Alteration (exp y Building Addit se: (explain) nal Use: (explain) control (are) providing (are) providing in or with (are) providing in or with	Proposed Struct structure on property nting shack, etc.) rch ck d Garage v, or Vsleeping quarter red date) lain) iin) iin) cion/Alteration (explain)	ure) s, or cooking n) without a permitting the permitting th	Compost Toile None Width: 24 Width: Width:	Dimensions (S F	(we) am
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Crescert Ave Ean Claime

ner(s) a letter of authorization must accompany this application)

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low: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCII Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (3) Show: All Existing Structures on your Property (4) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% Show any (*): (6) Show any (*):

Please complete (1) - (7) above (prior to continuing)

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Setback from the Established Right-of-Way	10-0	eet	Setback from the River, Stream, Creek	Feet	
			Setback from the Bank or Bluff	Feet	
Setback from the North Lot Line	100 + F	eet			
Setback from the South Lot Line	100 + F	eet	Setback from Wetland	Feet	
Setback from the West Lot Line	100 4 F	eet	20% Slope Area on the property	☐ Yes ☐ No	
Setback from the East Lot Line	35 F	eet	Elevation of Floodplain	Feet	
Setback to Septic Tank or Holding Tank	15 - 242 S F	eet	Setback to Well	Feet	
Setback to Drain Field	25 F	eet			
Setback to Privy (Portable, Composting)	N/A F	eet			

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

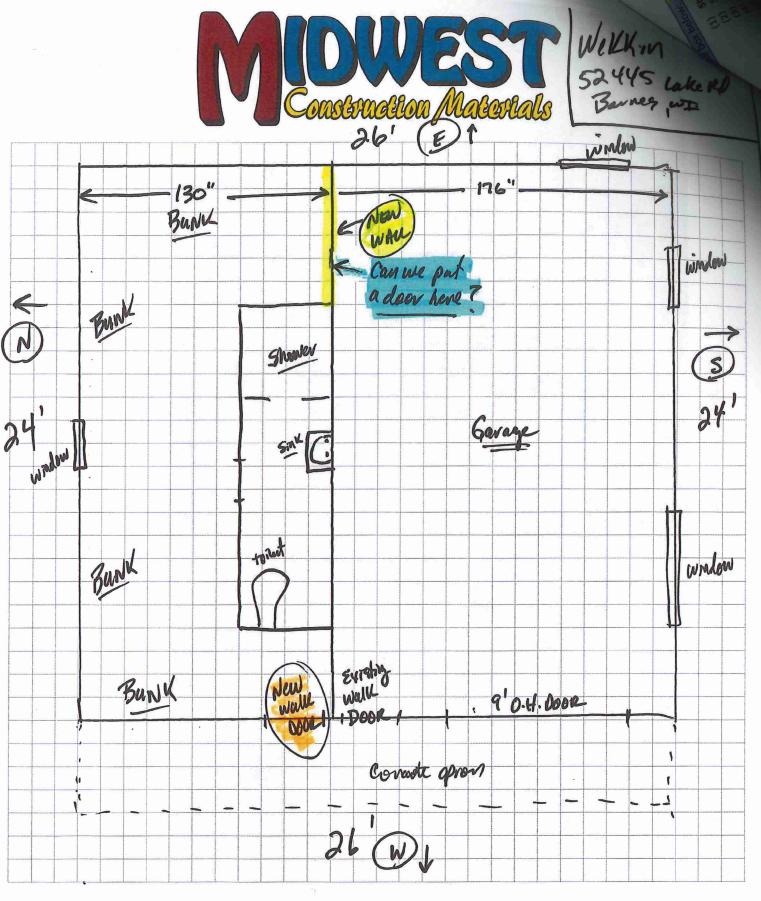
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult

to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	10-625	# of bedrooms: 2	Sanitary Date: 6 - 16 - 20			
Permit Denied (Date):	Reason for Denial:						
Permit #: 20-0252	Permit Date: 9-9	1-20					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Fused/Contiguence) Yes	ous Lot(s)) 💆 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☑ No	Affidavit Required ☐ Yes ☐ No Affidavit Attached ☐ Yes No No			
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by ☐ Yes ☐ No	/ Variance (B.O.A.)	#			
		Were Property Line	es Represented by Owner Was Property Surveyed	✓ Yes □ No □ Yes □ No			
Inspection Record:		1		Zoning District (R-2) Lakes Classification (NA)			
Date of Inspection: 7/17/20	Inspected by:	DEPARTS.		Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? Yes No - (If No they need to be attached.) Bunk House - No Sink outside bathrown or food prep area allowed bet UDC inspections as required							
Signature of Inspector:				Date of Approval: 9/9/20			
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit:	Hold For Fees: 🗌	<u> </u>			



3825 S. Mount Zion Road Decatur, IL 62521 Phone: 217-864-1278 Fax: 217-864-1285

220 Business Park Circle Stoughton, WI 53589 Phone: 608-205-6040 Fax: 608-205-6045 City, Village, State or Federal
May Also Be Required
After-the-Fact

LAND USE - X

SANITARY - 20-62S

SIGN
SPECIAL
CONDITIONAL
BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Darrel Wekkin 20-0252 Issued To: No. SW 1/4 of Range 9 Location: NE SW 34 **Township** 45 W. Town of Barnes $\frac{1}{4}$ of Section Subdivision CSM# Gov't Lot Lot Block

For: Residential Accessory Structure: [1- Story; Conversion to Bunkhouse (11' x 24') = 264 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Bunk house no sink outside bathroom or food prep area allowed. Get UDC inspections as required.

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NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 9, 2020

Date

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County

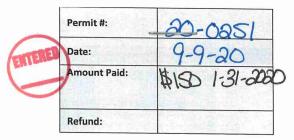
Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138



APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

JAN 3 1 2020

Bayfield Co. Zoning Dept.



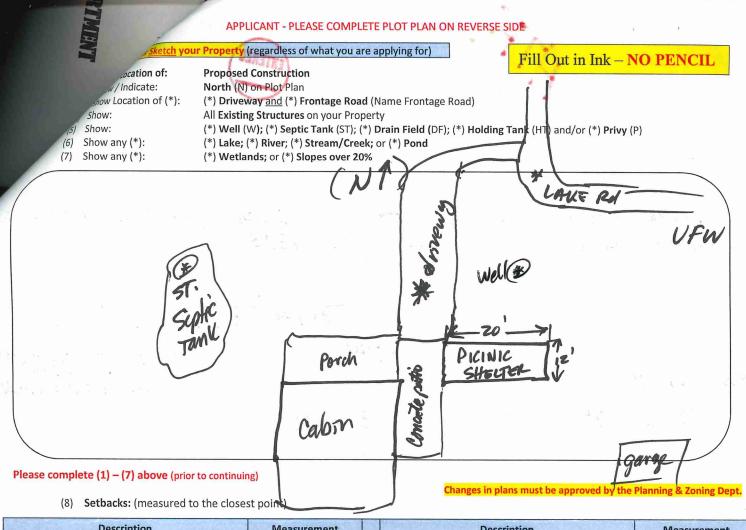
INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

)wner's Name:	REQUESTED	11/		Mai	ITARY PRIV	/Y 🗆	CONDIT	TONAL U	SE SPECIA tate/Zip:	L USE	□ B.O.A. [OTHE	
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Sayys	"Lake Ro	AO	(50M)		City/State/Zip:	5 1	T.	5487	,			Cell Pho	ne:
Contractor:			4441	Con	tractor Phone:		Plumbe					Plumbe	r Phone:
uthorized Agent:	(Person Signing Applica	ition on behal	f of Owner(s))	Age	nt Phone:		Agent I	/Jailing Ad	dress (include City	/State/	Zin):	Written	
						+	_				3.7	Authori	zation
PROJECT			4		Tax ID#		0	7 - 0	004-121	S- O	led Document:	☐ Yes	□ No
PROJECT LOCATION	Legal Descripti	on: (Use T	ax Statement)		3	144	- 4				04 -00 4		
SW 1/4, 00	F NE 5 1/4	Gov't Lot	Lot(s)	CSM	Vol & Page	CSM Do	c #	Lot(s) #	Block #	Subdiv	ision: 01-	000-	30000
Section 3	, Township	15 N, R	ange <u>09</u>	w	Town of:	Br	HEN	15		Lot Siz		Acre	
	☐ Is Property/	Land within	n 300 feet of R		ream (incl. Intermit	tent) D	X 1		is from Shorelin	ne :	Is your Prope		re Wetlands
Shoreland -	Creek or Land				yescontinue - ond or Flowage		lotos	Chu	la fue col	feet	in Floodplai Zone?	n	Present?
	_ is i toperty/	-and with	1000 ICCL UI		yescontinue		istance	otructure	is from Shorelin	ne : feet	☐ Yes ☐ No		☐ Yes ☐ No
Non-Shoreland	1										□ 140		
Value at Time							7-1-14						
of Completion * include	Dualast		Project		Project		Total # bedroo			hat Ty	pe of / System(s)		Type of Water
donated time	Project		# of Storie	es	Foundation		on		ls on t	the pro	perty or		on
& material	☐ New Constru	ction	☐ 1-Story		□ Personant		proper				property?		property
			☐ 1-Story		☐ Basement	-			Municipal/Cit (New) Sanitar	•	rify Type:		☐ City
\$ 2 000	☐ Addition/Alt	Addition/Alteration Loft			☐ Foundation ■				(New) Same	y Spec	iny Type.		₩ell
ישכןש	☐ Conversion		☐ 2-Story		□ Slab □ :			Sanitary (Exists) Specify Type:			cify Type:	,	
	☐ Relocate (exis	ting bldg)				\dashv		-	Privy (Pit) or) gallan)	
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	Property	01./10			☐ Year Round		,		Compost Toil	et]
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roposed Cons	truction: (overal	dimension	is) Buff f	n 2	Length:	20	1	Wid	ith: /a'		Height	appr	c7'
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		Principal	Structure (fi	rst stru	icture on prope		20	117	111 0017	1	X		Footage
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Residentia	l Use		with Loft							(X)	
			with a Por with (2 nd)							(X)	
			with a Dec							1	X	-	
			with (2 nd)							(X)	
Commerci	al Uso									(Χ)	
Commerci	al Use		with Attac	hed G	arage								
Commerci	al Use		se w/ (□ sanit	ary, <u>or</u>	☐ sleeping qua					(Х)	
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	Use	Mobile H Addition, Accessor	se w/ (□ sanit lome (manufad /Alteration (e y Building (ex	ary, <u>or</u> ctured o explain)	☐ sleeping quadate)					(X X X)))	
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• Municipal (we) declare that this are) responsible for t	Use	Mobile H Addition, Accessor Accessor Special U Condition Other: (ex	se w/ (sanit lome (manufac /Alteration (e y Building (ex y Building Ad se: (explain) _ nal Use: (expla xxplain) _ OBTAIN ATOPRIMS If (are) prov	ctured (explain) plain) dition	Alteration (ex	Iplain)	IOUT A PP	EFMIT WILI	RESULT IN PENAL	FIES ect and co	X X X X X X X X X X mplete. I (we) ackn		

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent:

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed



Description	Measurem	ent	Description	Measurement
Setback from the Centerline of Platted Road	10000 +	Feet	Setback from the Lake (ordinary high-water mark)	()/// Feet
Setback from the Established Right-of-Way		Feet	Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	90 t	Feet		
Setback from the South Lot Line	50+	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	100 1	Feet	20% Slope Area on the property	Yes 🗆 No
Setback from the East Lot Line	50+	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	30	Feet	Setback to Well	Feet
Setback to Drain Field	30	Feet		
Setback to Privy (Portable, Composting)		Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

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(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

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For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

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Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: 20-6251	Permit Date: 9-9	-20	Statute Biss	The state of the second
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Procedure (Pused/Contigue) Yes (Fused/Contigue) Yes (Deed of Record Procedure)	ious Lot(s)) 💆 No	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached Yes No
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by	/ Variance (B.O.A.) Case	#:
		Were Property Line	es Represented by Owner Was Property Surveyed	✓ Yes
Inspection Record:		1	THE REST WATER	Zoning District (12-2) Lakes Classification (12-2)
Date of Inspection:	Inspected by:			Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Atta	ched? Yes No - (If NoT for	No they need to be atta Human Hab	ched.) . Yation on S/	leeping
Signature of Inspector:				Date of Approval: 9/9/20
Hold For Sanitary: Hold For TBA: Hold For TBA:	Hold For Affin	davit: 🗌	Hold For Fees: 🗌	

Village, State or Federal
May Also Be Required
After-the-Fact

ND USE - X

ANITARY
SIGN
SPECIAL
CONDITIONAL
BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Darrel Wekkin 20-0251 Issued To: No. SW 1/4 of 45 Range 9 Barnes SW 34 Location: NE Township N. W. Town of Section

Gov't Lot Lot Block Subdivision CSM#

For: Residential Accessory Structure: [1- Story; Covered Picnic Shelter (20' x 12') = 240 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not for human habitation.

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NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 9, 2020

Date

Town, City, Village, State or Federal Permits May Also Be Required

not completed or if any conditions are violated.

LAND USE - X
SANITARY - None
SIGN SPECIAL - NA
CONDITIONAL - NA

BOA -



WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

Issued To: JOHN A & TRACEY L WALT No: 09012002-2020 Tax ID: 3913 Section 18 Township 45 N. Range 09 W. **BARNES** Location: POTAWATOMI ESTATES A SUB-DIV IN NE1/4 LOTS 9 & 10 IN V.1130 P.808 1476 **Subdivision: POTAWATOMI CSM# NA** Block Govt Lot 0 Lot **ESTATES** For. Residential / Detached Garage / 20L x 12W x 10H Condition(s): Not to be used for human habitation or sleeping purposes. No water under pressure or plumbing fixtures unless said structure is permitted to be connected to a code compliant POWTS. NOTE: This permit expires one year from date of issuance if the authorized **Rob Schierman** construction work or land use has not begun. **Authorized Issuing Official** Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the Fri Sep 11 2020 application information is found to have been misrepresented, erroneous, or incomplete. Date This permit may be void or revoked if any performance conditions are